Attorney's Docket No.: 5199-26

DECLARATION FOR PATENT APPLICATION SOLE OR JOINT

We, Leonidas Stefanis and Lloyd A. Greene hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention titled:

DOPAMINERGIC CELL LINES STABLY EXPRESSING A53T ALPHA-SYNUCLEIN AND METHODS OF USING SAME the specification of which is attached hereto.

I HEREBY STATE THAT I HAVE REVIEWED AND UNDERSTAND THE CONTENTS OF THE ABOVE-IDENTIFIED SPECIFICATION, INCLUDING THE CLAIMS.

I ACKNOWLEDGE THE DUTY TO DISCLOSE INFORMATION WHICH IS MATERIAL TO THE EXAMINATION OF THIS APPLICATION IN ACCORDANCE WITH TITLE 37, CODE OF FEDERAL REGULATIONS, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)					Priority	Claimed
(Number)	(Country)		(Day/Month/Year Filed)		Yes	No
	;		, 4.		- [
(Number)	(Country)		(Day/Month/Year Filed)		Yes	No
(Number)	(Country)					
I hereby claim the benefit under Title 35.	• • • • • • • • • • • • • • • • • • • •		(Day/Month/Year Filed)		Yes	No
SUBJECT MATTER OF EACH OF THE APPLICATION IN THE MANNER PROACKNOWLEDGE THE DUTY TO DIS REGULATIONS, §1.56(a) WHICH OCC PCT INTERNATIONAL FILING DATE	OVIDED BY THE FIR SCLOSE MATERIAL I CURRED BETWEEN T	ST PARAGRAPI NFORMATION THE FILING DA	H OF TITLE 35, UNITE AS DEFINED IN TITLE	STATES COD	E, §112, I	
60/433,450	Dece	ember 13, 200	2	Abandone	ed	
	Dece			Abandone S: Patented, Pend		oned)
(Application Serial Number)		(Filing Date)	(STATU	S: Patented, Pend S: Patented, Pend	ing, Abando	oned)
(Application Serial Number) (Application Serial Number) POWER OF ATTORNEY: As a name	ed inventor, I hereby ap	(Filing Date) (Filing Date)	(STATU	S: Patented, Pend S: Patented, Pend at(s) to prosecute	ing, Abando	oned)
(Application Serial Number) (Application Serial Number) (Application Serial Number) POWER OF ATTORNEY: As a name transact all business in the Patent and Tra	ed inventor, I hereby ap	(Filing Date) (Filing Date) (Formula (Filing Date) (Filing Date) (Filing Date) (Filing Date)	(STATU (STATU ng attorney(s) and/or ager	S: Patented, Pend S: Patented, Pend at(s) to prosecute mber).	ing, Abando ing, Abando this appli	oned) cation and
(Application Serial Number) (Application Serial Number) (Application Serial Number) POWER OF ATTORNEY: As a name transact all business in the Patent and Tra (LIST SENIOR PATENT COUNSEL AI Leslie Gladstone Restaino, I	ed inventor, I hereby ap ademark Office connect ND ATTORNEY HAN Reg. No. 38,893	(Filing Date) (Filing Date) (Formula (Filing Date) (Filing Date) (Filing Date) (Filing Date)	(STATU (STATU ng attorney(s) and/or ager name and registration nu VITH PATENT OFFICE	S: Patented, Pend S: Patented, Pend ht(s) to prosecute mber). REGISTRATIO	ing, Abando ing, Abando this appli	oned) cation and
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Attorney Docket No. 5199-26

DECLARATION FOR PATENT APPLICATION SOLE OR JOINT

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may iconardize the validity of the application or any potent issuing thereon

may jeopardize the validity of the application or an	y patent issuing thereon.
NAME OF SOLE OR FIRST INVENTOR:	STEFANIS, Leonidas
INVENTOR'S SIGNATURE	
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INVENTOR, IF ANY:	
INVENTOR'S SIGNATURE	
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POST OFFICE ADDRESS	